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**** If the "Highest Number Previously Paid For" IN THIS SPACE is less than the entry in column 1, write "0" in column 3.**

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10799644

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | 20 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 20 minus 20= | 0 |
| INDEPENDENT CLAIMS | 10 minus 3 = | 7 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE

RATE

FEE

OTHER THAN
OR SMALL ENTITY

RATE

FEE

BASIC FEE

385.00

BASIC FEE

770.00

XS 9=

XS18=

X43=

X86=

+145=

+290=

TOTAL

TOTAL

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|--------------------------|---|------------------|
| | Total | 20 | Minus | 20 = 1 |
| Independent | 1 | Minus | 3 | 1 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> | | |

SMALL ENTITY

OTHER THAN
OR SMALL ENTITY

RATE

ADDI-
TIONAL
FEE

RATE

ADDI-
TIONAL
FEE

X\$ 9=

X\$18=

X43=

X86=

+145=

+290=

TOTAL

TOTAL

(Column 1)

(Column 2) (Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|--------------------------|---|------------------|
| | Total | Minus | = | |
| Independent | Minus | = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> | | |

RATE

ADDI-
TIONAL
FEE

RATE

ADDI-
TIONAL
FEE

X\$ 9=

X\$18=

X43=

X86=

+145=

+290=

TOTAL

TOTAL

(Column 1)

(Column 2) (Column 3)

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|--------------------------|---|------------------|
| | Total | Minus | = | |
| Independent | Minus | = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> | | |

RATE

ADDI-
TIONAL
FEE

RATE

ADDI-
TIONAL
FEE

X\$ 9=

X\$18=

X43=

X86=

+145=

+290=

TOTAL

TOTAL

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.